

# Bethesda Dental Spa

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## Written Patient Financial Agreement

You may not be aware, but dental insurance came about in the early 1960's that through the years Dental Insurance Companies have not increased their benefits to the patient even \$1 and yet your monthly premiums have increased over 3,000% in that time. We do our best with the insurance information given to us to verify your personal insurance coverage and to find out your benefits. However, you need to be aware that the information they (your insurance) provide to us is very limited and is not a guarantee they will cover any procedures. We will provide you with an estimate of your co-pay. ***The Patient is responsible for the account and your insurance is only a third party of benefits. The balance and treatment is the patient's sole responsibility and NOT the responsibility of the insurance carrier.*** You will receive a monthly statement to keep you aware of the status of your accounts. If your insurance has not paid Bethesda Dental Spa within 30 days of treatment, the balance will become the responsibility of the patient.

For Patient's with dental insurance, we are happy to work with your carrier to maximize your benefits and directly bill them for reimbursement for your treatment but the balance is ultimately the patient's responsibility.

Bethesda Dental Spa requires payment prior to beginning of your treatment. If you choose to discontinue care before treatment is complete, 25%-50% of the treatment expense will be eligible for refund. For larger, more comprehensive treatment plans of \$500.00, a 50% deposit is required to secure your initial treatment appointment. This deposit is non-refundable if canceled more than 48 hours after initial payment.

### Insurance Are Only Estimates

Any and all estimates you have received from our office are just that...**An Estimate!** As a courtesy to our patients, we do phone your insurance carrier for a breakdown of benefits and that information is reflected on your estimate. Unfortunately, your insurance carrier will **NOT** guarantee any information given to us; therefore, we cannot guarantee what percentage of your treatment they will cover. We do not base our diagnosis on what your insurance will, or will not cover. Diagnosis of treatment is based on your dental health and what the teeth, bone, and/or gums are in need of, in a conservative approach. The patient is ultimately responsible for all charges incurred with our office should your insurance carrier not pay for any reason.

### 30 days after treatment

If your insurance has not paid or has made a less payment on your behalf, you are responsible for your account, and the remaining balance is due and payable immediately by you, the patient. It is typical for insurance carriers to delay in their payment to the provider. We strongly urge you to call your insurance company after 30 days to pay on behalf of your claim to avoid having to satisfy the balance of your account.

### Financial Agreement

\_\_\_\_\_ Payment in full for all charges is required at the time of visit. Delinquent accounts (30 days or older) are subject to reasonable service charge and/or modest interest rates (based on 2% interest rate per month).

\_\_\_\_\_ Collection Proceedings: We want to avoid any possibility of collections for your account, but in the event your account is turned over to a collection agency for non-payment or other delinquency, you will be responsible for payment of any collection costs and/or attorney fees, in addition to the balance owed. Any account turned over to a collection agency forfeits any past special fees and/or discounts will be reversed and you will be responsible for payment of regular fees for procedures at the time of service.

\_\_\_\_\_  
Patient name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date